



LICENSING OUTPATIENT SERVICES WITH APPLIED BEHAVIOR ANALYSIS TRACK GUIDANCE

This guidance document is designed to help Outpatient programs with an Applied Behavioral Analysis track work within DBHDS regulations and is not intended to replace or supersede program regulations. Program should also be familiar with Department of Medical Assistance Services (DMAS) regulations on Outpatient Services. This DBHDS guidance document is applicable to all Outpatient programs with an applied behavior analysis track cases regardless of funding resources.

PROGRAM OVERSIGHT

1. All programs must have either a Licensed Mental Health Professional (LMHP) with expertise in Applied Behavioral Analysis or an individual certified by the Board as a Board Certified Behavior Analyst (BCBA) responsible for clinical oversight of the program. If the LMHP or BCBA is a contractor there must be a written agreement in place between the LMHP or BCBA and the Provider outlining the duties and responsibilities of the LMHP/BCBA and the amount of time dedicated to the program.

STAFF QUALIFICATIONS

1. Applied Behavior Analysis Services can only be provided by individuals who are LMHP's, BCBA's or meet the qualifications described below to provide direct services.
2. The individual providing direct services, if not a qualified LMHP or BCBA, must have completed the following:
 - I. Forty (40) hours of classroom training in ABA therapy techniques. The 40 hours must be provided by an LMHP with expertise in applied behavior analysis or a BCBA. The training must be documented and the direct care staff must also have a Bachelor's degree in a human services or educational field with one year experience with individuals with mental health or developmental disabilities.

ASSESSMENT

1. Date documenting the need for applied behavior analysis (eligibility information based on medical necessity) is a required part of the assessment. The assessment must be done by the LMHP or BCBA. The assessment must be done face to face. The diagnosis can be done by the LMHP or if the BCBA does the assessment there must be a previous diagnosis done by an LMHP during the previous six months.

SUPERVISION

1. Clinical supervision must be face to face and provided weekly.
2. The clinical supervisor is to be available for phone consultation with staff as needed.
3. Clinical supervision is to be documented by the LMHP or BCBA providing that supervision.

DATA COLLECTION

1. The provider must document a child's progress towards achieving behavioral objectives through analysis and reporting of quantifiable behavioral data.
2. The provider must maintain a copy of that data in the clinical record.